

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**
FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER: 0 — 2 — 0 — 1 — 0 —	2. STATE: Minnesota
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
4. PROPOSED EFFECTIVE DATE April 1, 2002	

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN ☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)


6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 447.201 (b)	7. FEDERAL BUDGET IMPACT: a. FFY'02 \$ 0 b. FFY'03 \$ 0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Att. 4. 19-B, p. 62	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Att. 4. 19-B, p. 61

10. SUBJECT OF AMENDMENT:


Rates: Pregnancy-related and postpartum services

11. GOVERNOR'S REVIEW (Check One):

☒ GOVERNOR'S OFFICE REPORTED NO COMMENT ☐ OTHER, AS SPECIFIED:
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: Stephanie Schwartz Minnesota Department of Human Services Federal Relations Unit 444 Lafayette Rd. No. St. Paul, MN 55155-3852
13. TYPED NAME: Mary B. Kennedy	
14. TITLE: Medicaid Director	
15. DATE SUBMITTED: 6/17/02	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 6-21-02	18. DATE APPROVED: 8/1/02
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: April 1, 2002	20. SIGNATURE OF REGIONAL OFFICIAL: 
21. TYPED NAME: Cheryl A. Harris	22. TITLE: Associate Regional Administrator Division of Medicaid and Children's Health

23. REMARKS:

RECEIVED

JUN 21 2002

DMCH - MI/MN/WI

MINNESOTA
MEDICAL ASSISTANCE

Federal Budget Impact of Proposed State Plan Amendment TN 02-10
Attachment 4.19-B: Pregnancy-Related and Postpartum Services for 60 Days
after Pregnancy Ends

Pregnancy-related and postpartum services for 60 days after the pregnancy ends, item 20.a.

A. As noted with the submittal of approved TN 02-01, as part of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 requirements, the Centers for Medicare & Medicaid Services is nationalizing state-level X procedure codes. Effective January 1, 2002, the Health Care Procedure Coding System (HCPCS) H prenatal procedure codes could be substituted for the state-level X prenatal procedure codes. Until April 1, 2002, providers were able to continue to bill using the X codes.

Effective April 1, 2002, the state-level X procedure codes are deleted.

B. Effective January 15, 2002, providers were allowed to bill using the new Prenatal Education H1003 procedure code in place of any of the three state-level X procedure codes/modifier combination for the Prenatal Health Education I and II and Prenatal Nutrition Education components. In other words, the three current X procedure codes/modifier combination for prenatal education were converted into the H1003 code. The Department established the H1003 base rate at \$38.92 by using the procedure in Attachment 4.19-D, page 1a—establishing the maximum payment rate in calendar year 1989.

Effective April 1, 2002, the Prenatal Health Education I and II and Prenatal Nutrition Education components are deleted, leaving the H1003 procedure code as the procedure code to be billed when providing prenatal education.

The Department estimates that there will be no federal budget impact.

STATE: MINNESOTA

ATTACHMENT 4.19-B

Effective: April 1, 2002

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TN: 02-10

Approved: AUG 01 2002

Supersedes: 02-04

20.a. Pregnancy-related and postpartum services for 60 days after the pregnancy ends.

Payment was derived from the additional costs of delivering these services above and beyond the global prenatal care package.

Procedure Code(s)	Component	Base Rate: 1/1/02
H1000 or X5494	Prenatal Risk Assessment	\$5.40
H1001 or X5495	At Risk Antepartum Management	\$64.89
H1002 or X5496	Care Coordination	\$25.95
X5497	Prenatal Health Education-I	\$64.89
X549752	Prenatal Health Education-H	\$55.15
X5498	Prenatal Nutrition Education	\$16.22
H1003	Prenatal Education	\$38.92
H1004 or X5499	At Risk Follow-Up Home Visit	\$52.79
H1005 or X5493	Enhanced Package	\$279.91

The base rates are increased by 26.5%.